

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVS419AGC</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/21/2010</b>
NAME OF PROVIDER OR SUPPLIER  <b>THE SALVATION ARMY PATHWAYS PROGRAM</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>37 WEST OWENS N LAS VEGAS, NV 89030</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	Initial Comments  The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.  This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 7/21/10. The facility received an annual survey grade of C. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.  The facility is licensed for 42 Residential Facility for Group beds which provide care to persons with mental illness, Category I residents. The census at the time of the survey was 35. Ten resident files were reviewed and ten employee files were reviewed. One discharged resident file was reviewed.  The following deficiencies were identified:	Y 000		
Y 103 SS=D	449.200(1)(d) Personnel File - NAC 441A / Tuberculosis  NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.  This Regulation is not met as evidenced by:	Y 103		

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 103	Continued From page 1  Based on record review on 7/21/10, the facility failed to ensure that 1 of 10 caregivers complied with NAC 441A.375 regarding pre-employment physical exam (Employee #4) for the protection of all residents.  Severity: 2 Scope: 1	Y 103		
Y 105 SS=F	449.200(1)(f) Personnel File - Background Check  NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive.  This Regulation is not met as evidenced by: Based on record review on 7/21/10, the facility failed to ensure 5 of 10 caregivers met background check requirements (Employee #1 - FBI, #2 - FBI and State, #9 - State, #7 and #8 - criminal history statement).  Severity: 2 Scope: 3	Y 105		
Y 180 SS=D	449.209(7) Health and Sanitation-Lighting  NAC 449.209 7. The facility must maintain electrical lighting as necessary to ensure the comfort and safety of the residents of the facility.	Y 180		

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Y 180	Continued From page 2  This Regulation is not met as evidenced by: Based on observation on 7/21/10, the facility failed to ensure that 2 of 11 emergency lights were functioning.  Severity: 2 Scope: 1	Y 180			
Y 255 SS=F	449.217(6)(a)(b) Permits - Comply with NAC 446 on Food Service  NAC 449.217 6. A residential facility with more than 10 residents must: (a) Comply with the standards prescribed in chapter 446 of NAC. (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division.  This Regulation is not met as evidenced by: Observations and interviews during the survey of 7/21/10 revealed that the kitchen did not meet the requirements of NAC 446.  1. Risk Factors:  a. Plates of food, containing hot dogs and a rice mixture, that were left over from yesterday's meal service, were stored in the household-grade refrigerator that was designated staff food only, at	Y 255			

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Y 255	Continued From page 3  55 degrees F.  b. The person in charge of the food operations at this facility was not food safety certified.  2. Sanitation and Cleaning:  a. Plates of food left over from yesterday's meal were stored in the refrigerator unlabeled and undated.  b. Milk was stored in an empty water bottle that was not designed for multiple uses and was not labeled or dated.  c. There was no hand soap at the kitchen hand washing sink.  d. There was a bowl of ice uncovered and otherwise unprotected on the counter for self-service by residents.  3. Equipment and Maintenance  a. The gasket on the door of the commercial reach-in refrigerator was damaged.  b. The sneeze guard on the portable salad bar was badly cracked.  Severity 2 ; Scope 3	Y 255			
Y 430 SS=E	449.229(1) Protection from Fire  NAC 449.229 1. The administrator of a residential facility shall ensure that the facility complies with the regulations adopted by the State Fire Marshal	Y 430			

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Y 430	Continued From page 4  pursuant to chapter 477 of NRS and all local ordinances relating to safety from fire. The facility must be approved for residency by the State Fire Marshal.  This Regulation is not met as evidenced by: Based on record review on 7/20/10, the facility did not ensure smoke detectors were tested 3 out of the past 12 months (April, May, June).  This was a repeat deficiency from the 6/3/09 State Licensure survey.  Severity: 2 Scope: 2	Y 430		
Y 434 SS=D	449.229(3) Emergency Drills  NAC 449.229 3. A drill for evacuation must be performed monthly on an irregular schedule, and a written record of each drill must be kept on file at the facility for not less than 12 months after the drill.  This Regulation is not met as evidenced by: Based on record review on 7/21/10, the facility did not ensure that monthly evacuation drills were conducted on an irregular schedule for the past 1 of 12 months (June of 2010).  Severity: 2 Scope: 1	Y 434		

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Y 883  Y 883 SS=D	Continued From page 5  449.2742(7) Medication / Resident Refusal  NAC 449.2742 7. If a resident refuses, or otherwise misses, and administration of medication, a physician must be notified within 12 hours after the dose is refused or missed.  This Regulation is not met as evidenced by: Based on record review the facility failed to notify a physician after 1 of 10 residents (Resident #8) missed doses of nine prescribed medications.  Severity : 2 Scope : 1	Y 883  Y 883		
Y1010 SS=D	449.2764(1) Mental Illness Training  NAC 449.2764 1. A person who provides care for a resident of a residential facility for persons with mental illnesses shall, within 60 days after he becomes employed at the facility, attend not less than 8 hours of training concerning care for residents who are suffering from mental illnesses.  This Regulation is not met as evidenced by: Based on record review and interview on 7/21/10, the facility failed to ensure 2 of 10 caregivers	Y1010		

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Y1010	Continued From page 6  (Employee #9 and #10) obtained the required 8 hours of mental illness training within 60 days of employment.  This is a repeat deficiency from the annual survey of 6/30/09.  Severity: 2    Scope: 1	Y1010		

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